

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Mug</i>		12/27/99
O.I.P.E. CLASSIFIER		47	11/01/00
FORMALITY REVIEW		209652	02/02/00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) ... Canceled A ..... Appeal  
 ÷ ..... Restricted 0 ..... Objected

Claim	Final	Original	Date
1	✓	✓	12/03
2	✓	✓	12/03
3	✓	✓	10/29/02
4	✓	✓	2/5/04
5	✓	✓	6/29/04
6	✓	✓	✓
7	✓	✓	✓
8	✓	✓	✓
9	✓	✓	✓
10	✓	✓	✓
11	✓	✓	✓
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If more than 150 claims or 10 actions  
staple additional sheet here

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